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Bib Data Sheet

CONFIRMATION NO. 2744

SERIAL NUMBER 09/690,159	FILING OR 371(c) DATE 10/17/2000 RULE	CLASS 725	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. INTL-0472-US (P10019)
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/30/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 3
Verified and Acknowledged		Examiner's Signature _____ Initials _____			

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TITLE

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